

CHAPTER 6

CONCLUSION

Substance abuse is a complex and costly chronic illness. The prevention, diagnosis, and treatment of substance abuse is difficult, as it is with many other chronic illnesses. Many individuals with substance abuse problems either do not recognize they have a problem or do not seek treatment due to access barriers. More than 90% of people that abuse or depend on alcohol or illicit drugs in North Carolina do not obtain services. Many of those who do seek treatment may find a system that is inadequate to meet their needs.

Alcohol and drug abuse cost the North Carolina economy over \$12.4 billion in direct and indirect costs in 2004.⁵ This includes the direct costs of prevention, treatment, and rehabilitation as well as the indirect costs associated with motor vehicle accidents, premature death, comorbid conditions, loss of productivity, and unemployment. Yet only 6% of the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (DMHDDSAS) expenditures in 2005 were for substance abuse services. Overall, North Carolina spent less than \$140 million to fund substance abuse services in the state, a sum that left North Carolina substance abuse services underfunded in relation to other states.¹⁴ A report presented to the North Carolina General Assembly in 2007 estimated it would take an additional \$35 million in appropriations to achieve parity with national per capita funding for substance abuse services.⁴

The North Carolina General Assembly asked the North Carolina Institute of Medicine (NC IOM) to convene a task force to study substance abuse services in the state (SL-2007-323 §10.53A). The Task Force was charged with developing interim recommendations for the 2008 session and with presenting its final report to the 2009 session.

The Task Force met 7 times between October 2007 and April 2008. Most of the Task Force's work focused on developing a comprehensive system of care to provide evidence-based interventions based on a person's need. This comprehensive system begins with a strong prevention effort, targeted at youth and adolescents. Targeting youth and young adults will help reduce the number of people who later become addicted, as evidence shows that people who initiate substance use in childhood or adolescence are more likely to later become addicted.

Early screening and intervention strategies are needed for people who are starting to engage in risky behaviors but who have not yet become

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